1999 NATIONAL HIV PREVENTION CONFERENCE

Abstract 307

TITLE: Stage Based Behavioral Counseling for HIV/STD Prevention

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ISSUE: Recent research has demonstrated the effectiveness of individual and group level behavioral counseling for persons at high risk or HIV and STDs. Stage of Change (SOC) behavioral theory has been used successfully influences a variety of health related behaviors. Many clients at risk for STD/HIV do not see a need for sexual/substance use behavior change or have significant barriers to change. SOC provides a structure for behavioral counseling that can be successfully used with these clients in clinic and ommunity based settings.

SETTING: HIV and STD prevention providers in clinic and community based settings.

PROJECT: Public STD/HIV prevention services in Monroe County, Rochester, N.Y. are delivered through a collaboration between the Monroe County Department of Health and the University of Rochester. Services are provided to over 8,400 clients annually in clinic and community based settings, including mobile units, homeless shelters, and incarceration facilities for women and adolescents. In 1998, over14,000 HIV counseling sessions were provided. We developed and implemented a theory based behavioral intervention known as Rochester STD/HIV Behavioral Counseling (RoSHBeC). RoSHBeC is an adaptation of SOC behavior change theory and is used for individual and group level STD/HIV risk reduction. In 1995, we joined with the New York State STD/HIV Prevention Training Center (PTC) and were designated as one of four Part II Health Behavior Training Centers of the National Network of STD/HIV PTCs. A variety of STD/HIV prevention providers were trained to provide this stage based behavioral counseling intervention in clinic and community settings.

RESULTS: The collaboration is currently using RoSHBeC for all STD/HIV prevention services in Monroe County including risk reduction, counseling and testing, partner notification and transitional case management. Prevention providers assess each client in relation to their 'readiness' to change their sexual/substance use and health care seeking behaviors. Providers **th** deliver one of twelve counseling interventions, which match the clients' SOC. This allows a provider to deliver effective counseling interventions to all clients, including those who see no need to change or have significant barriers. As a result of wickspread training RoSHBeC is currently being used in a variety of clinical and community based settings in New York State as well as other states, primarily in the northeast region.

LESSONS LEARNED: Front line staff especially wants counseling interventions for 'difficult' clients who are perceived as resistant to change. Incorporating new skills is a challenging behavior change for prevention providers. Training by persons who are experienced in **au**cally providing behavioral counseling to client 's in different stages of 'readiness' facilitates this change through enhanced credibility and problem solving. Technical assistance may be needed to implement a behavioral intervention into existing program

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